



OFFICE OF FINANCE
FEB 13 2003
JAN 16 2003

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PATENT
0071-0470P
Refund
05-22-03

IN THE U.S. PATENT AND TRADEMARK OFFICE

Applicant: Hiroshi KAMO et al. Conf.: 4237
Appl. No.: 10/086,852 Group:
Filed: March 4, 2002 Examiner:
For: A RESIN COMPOSITION

Assistant Commissioner for Patents
Washington, DC 20231

ATTN: W.P. ERWIN, DIRECTOR OF FINANCE
REFUND SECTION
ACCOUNTING DIVISION
OFFICE OF FINANCE

JAN 16 2003

REQUEST FOR REFUND
(Improper Charge of Deposit Account)

I. REFUND REQUEST

This is a request for a refund with respect to the charge to Deposit Account
02-2448 shown on the statement dated March 8, 2002 for the above-identified

☒ application

☐ patent

☐ A copy of the monthly statement in which the error referred to occurs,
accompanies this request.

II. FEES CHARGED FOR WHICH REFUND REQUESTED

	AMOUNT OF REFUND <u>REQUESTED</u>
<input type="checkbox"/> filing fee	_____
<input type="checkbox"/> surcharge for filing the basic filing on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
and/or	
<input type="checkbox"/> surcharge for filing the oath or declaration on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
<input type="checkbox"/> extension of term	
<input type="checkbox"/> first month	_____
<input type="checkbox"/> second month	_____
<input type="checkbox"/> third month	_____
<input type="checkbox"/> fourth month	_____
<input checked="" type="checkbox"/> excess claims	<u>144.00</u>
<input type="checkbox"/> issue fee	_____
<input type="checkbox"/> petition fee	_____
<input type="checkbox"/> patent maintenance fee	
<input type="checkbox"/> first maintenance fee	_____
<input type="checkbox"/> second maintenance fee	_____
<input type="checkbox"/> third maintenance fee	_____
<input type="checkbox"/> patent maintenance fee surcharge	_____
<input type="checkbox"/> Other: <u>multiple dependent claims</u>	<u>144.00</u>

TOTAL REFUND REQUESTED	<u>\$144.00</u>

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

On March 4, 2002 Applicants filed the above-identified application and paid \$370.00 by check which included \$280.00 for multiple dependent claims and \$90.00 for extra claims. However, on March 8, 2002 and March 29, 2002, Applicants' deposit account was charged a total of \$648.00. Therefore, the total claim fee paid was \$1018.00 (\$370.00 + \$648.00).

Applicants calculate that the total fee (multiple dependent claim fee and extra claims fee should be \$874.00 (\$280.00 multiple dependent claim fee and \$594.00 (33 extra claims)); therefore, Applicants should be credited **\$144.00** (\$1018.00 - \$874.00).

IV. MANNER OF REFUND


Please make refund by crediting Account No. 02-2448.

We respectfully request that the attached copy of this letter be returned to us with an indication that the credit has been processed.

Sincerely,

Respectfully submitted,

BIRCH, STEWART, KOLASCH & BIRCH, LLP

By  #43525
for Raymond C. Stewart, #21,066

RCS/GMD/gh
0071-0470P

P.O. Box 747
Falls Church, VA 22040-0747
(703) 205-8000

Attachment